

# THE LOCAL CHOICE E-NEWS

## Department of Human Resource Management State and Local Health Benefits Programs

February 27, 2014

### Important!

Note updated TLC Q&As, and TLC Group Adjustment and Personal Data forms attached, and [2014-15 TLC enrollment form](#) on the website.

New email address and fax number are on the revised forms.

### Consider Medicare Coverage for Your Group

Your renewals are on the way and should be delivered by March 1. Now is the time to consider adding Advantage 65 (our Medicare Supplement) to your program. You can save yourself and your employees lots of time and possible monetary loss.

Please note: Medicare-eligible retirees and Medicare-eligible dependents of any retiree cannot be covered by a Key Advantage, HDHP or regional plan.

A local employer is not required to offer retiree coverage or to pay any portion of the cost of coverage. However, Medicare eligible retirees (of any age) and their Medicare-eligible dependents may be covered only if your group offers one of our Medicare Supplement plans. We will be happy to discuss adding this coverage at your renewal. Contact Walt Norman, Program Manager at 804-786-6460 or by email at [walter.norman@dhrm.virginia.gov](mailto:walter.norman@dhrm.virginia.gov) if you have questions or need assistance.

### Retirement Application Window

Retirees must apply for coverage within 31 days of ending active employment for retirement. Retiring employees eligible for coverage through the group should complete a [TLC enrollment form](#). If the retiree chooses to waive coverage, they need to complete the waiver portion of the form. Group Benefits Administrators are responsible for informing retiring employees of their options and obtaining the proper forms and documentation.

Please use the Group Adjustment Form to terminate ineligible participants. Ineligibles will be removed from the plan, and all claims paid after Medicare eligibility will be retracted. Unless you offer a Medicare Supplemental Plan to which they can move, they will be responsible for re-payment of the full undiscounted amount of charges to their providers and may be subject to late entry penalties and delays in enrollment in Parts B and D of Medicare.

## HuRMan Reports

A report showing the affected employees/retirees and dependents is available by logging into the HuRMan File Repository. Your group's designated user previously received the user name and password necessary to access the HuRMan folder. Be sure to log in and check your reports regularly to avoid missing important information for managing your plan.

An updated list of HuRMan reports is found in the attached TLC Q&A. Your designated user should follow these steps to access your HuRMan folder:

1. Go to the Commonwealth's Department of Human Resource (DHRM) website [www.dhrm.virginia.gov](http://www.dhrm.virginia.gov) and select the "Information Technology" link
2. Select the "Agency Web Portal Login" link
3. Login using your HuRMan user name and password
4. Under the "Select an Application" drop down menu choose "Agency Repository"
5. Then select the desired report.

If you have a problem logging in to the HuRMan File Repository, please contact [Support@dhrm.virginia.gov](mailto:Support@dhrm.virginia.gov).

## Receiving TLC Communications

Please work with your Information Technology area to ensure that emails from the Virginia Department of Human Resource Management are received at your group. The [TLC E-News](#) and [TLC Sequential Memos](#) are usually sent by Anne Waring ([anne.waring@dhrm.virginia.gov](mailto:anne.waring@dhrm.virginia.gov)). Sometimes these communications will go into your spam folder or be blocked by an employer firewall. It is very important that you receive this information for updates in managing TLC benefits. You may also choose to set up internal email rules to direct communications to others in your office.

## Additional Resources

The attached TLC Q&A provides valuable information on eligibility, the Benefits Eligibility System (BES), which forms to use, coverage issues and other useful guidance. A packet including this issue of the TLC E-News, the Q&As and forms will be mailed to you under separate cover.

## The Affordable Care Act and 90-Day Waiting Periods

Does your plan have a 90 day waiting period before your new employees are eligible for TLC coverage? Final regulations on the Affordable Care Act (ACA) relating to this issue have been published. While waiting periods are permitted under the ACA, they cannot exceed 90 days. If your plan has a 90-day waiting period that must be met prior to a new employee becoming eligible for coverage, you may be in violation of the ACA. Since TLC coverage is effective on the first of the month following the date that a member becomes eligible, someone hired mid-month would be required to wait longer than 90 days to be covered. The provision requiring this limitation has many caveats, and there may be ways that your plan can continue this practice. Therefore, you should review this with your attorney or consultant and revise your Personnel Policy and Practices, as appropriate.